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PTO/SB/21 (05-03)

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/019,161
	Filing Date	March 2, 2002
	First Named Inventor	Betremieux
	Art Unit	1731
	Examiner Name	Jose A. Fortuna
Total Number of Pages in This Submission	Attorney Docket Number	119464

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Corrected Filing Receipt; Courtesy Copy of Declaration Filed with application
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Brian L. Belles
Signature	<i>Brian L. Belles</i>
Date	July 29, 2003

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Brian L. Belles		
Signature	<i>Brian L. Belles</i>	Date	July 29, 2003

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POCKET NO. 119464

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Betremieux et al

Confirmation No. 1665

Serial No.: 10/019,161

Group Art Unit: 1731

Filing Date: March 1, 2002

Examiner: Jose A. Fortuna

For: **HYDROPHOBIC CATIONIC DISPERSIONS STABILISED BY LOW MOLECULAR WEIGHT MALEIMIDE COPOLYMERS, FOR PAPER SIZING**

I, Brian L. Belles, Registration No. 51,322 certify that this correspondence is being deposited with the U.S. Postal Service as First Class mail in an envelope addressed to the Office of Initial Patent Examination's Filing Receipt Corrections, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

On July 29, 2003


Brian L. Belles, 51,322

**ATTN: OFFICE OF INITIAL PATENT
EXAMINATION'S FILING RECEIPT
CORRECTIONS**

Commissioner for Patents
P.O. Box 1450
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Dear Sir:

REQUEST FOR CORRECTED FILING RECEIPT

Attached is a copy of the Official Filing Receipt received from the U.S. Patent Office in the above-identified patent application for which issuance of a corrected filing receipt is respectfully requested. The requested changes are noted thereon, as well as listed below.

There is an error with respect to the following data, which is:

☐ incorrectly entered

and/or

☒ omitted.

Error in		Correct data
1.	<input checked="" type="checkbox"/> Applicant's name	1.Christophe Verge
2.	<input checked="" type="checkbox"/> Applicant's address	2. 36 Avenue de la gare, Coyo la Foret 60580, France
3.	<input type="checkbox"/> Title	3.
4.	<input type="checkbox"/> Filing Date	4.
5.	<input type="checkbox"/> Serial Number	5.
6.	<input type="checkbox"/> Domestic Priority Data	6.
7.	<input type="checkbox"/> Foreign/PCT Applications	7.
8.	<input type="checkbox"/> Other	8.

Applicant has attached a courtesy copy of the Declaration filed with the application showing signature and address for Christophe Verge. Applicant respectfully requests that a corrected Filing Receipt be forwarded to the undersigned in accordance with the correct information provided above. Thank you.

Respectfully submitted,

Dated: Brian L. Belles

Brian L. Belles
Registration No. 51,322

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